

2004

Wisconsin
Hospices
and Patients

*Bureau of Health Information and Policy
Division of Public Health
Wisconsin Department of Health and Family Services*

Wisconsin Hospices and Patients

2004

November 2005

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Division of Public Health
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Foreword

This report presents selected statistics on Wisconsin hospices and patients in 2004. The source of data for this document is the Annual Survey of Hospices, which was conducted by the Bureau of Health Information and Policy, Division of Public Health (DPH), Department of Health and Family Services, in cooperation with Wisconsin-licensed hospices; the Bureau of Fee-for-Service Health Care Benefits, Division of Health Care Financing; and the Bureau of Quality Assurance, Division of Disability and Elder Services. Wisconsin HOPE (Hospice Organization and Palliative Experts) has endorsed this survey.

The Bureau of Health Information and Policy would like to acknowledge and thank the personnel of Wisconsin hospices who provided information on their services and patients, and Wisconsin HOPE for its endorsement of the survey.

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Contents

Foreword	ii
Introduction	1
Key Findings	3
Hospice Characteristics	
Table 1. Hospice Services and Patients by Ownership Type	5
Table 2. Hospice Certification and Accreditation	5
Table 3. Full-time Equivalent Employees (FTEs) of Hospices by Ownership Type, December 2004	6
Table 4. Number of Hospice Volunteers and Hours of Volunteer Services.....	6
Table 5. Hospice Facility Operation and Contracts with Other Facilities	7
Characteristics of Hospice Patients	
Table 6. Principal Diagnosis of Hospice Patients.....	8
Figure 1. Principal Diagnosis of Hospice Patients.....	8
Table 7. Hospice Patients by Referral Source	9
Table 8. Discharges of Hospice Patients by Reason for Discharge.....	9
Map. Hospices in Wisconsin	10
Table 9. Hospices and Patients by County of Hospice Location.....	11
Table 10. Number, Percent, and Utilization Rate of Hospice Patients by Age and Sex	12
Figure 2. Percent of Hospice Patients by Age and Sex.....	12
Table 11. Hospice Patient Days by Level of Care.....	13
Table 12. Length of Stay of Hospice Patients Who Died or Were Discharged.....	13
Figure 3. Primary Pay Source at Admission to a Hospice Program	14
Table 13. Primary Pay Source at Admission to a Hospice Program	14
Table 14. Primary Pay Source for Hospice Patients, December 31, 2004	15
Table 15. Living Arrangements of Hospice Patients, December 31, 2004	15
Table 16. Deaths Among Hospice Patients by Site of Occurrence	16
Technical Notes	17
Survey Instrument	19

Introduction

Background

In general, *hospice* is a program that provides care to terminally ill persons who have a life expectancy of 6-12 months. (The patient must have a medical prognosis of 12 months or less to be eligible to receive services from a Wisconsin-licensed hospice. Medicare requires a prognosis of 6 months or less to elect the Medicare hospice benefit.) The goal of hospice is to care for people in the comfort of their own homes, including when “home” is a nursing home, community-based residential facility, adult family home, or other setting. “Hospice” can be an organization, a program within an organization, or a place (for details, see Wisconsin Administrative Code HFS 131).

Hospice care is significantly different in goals and emphasis from traditional medical practice. The goal of hospice care is palliative (seeking to improve patient comfort and to lessen pain and other symptoms of illness) rather than curative. It also emphasizes home care rather than institutional care, addresses the psychological, social, spiritual, and physical needs of the patient, and provides supportive services to the family. Volunteers are a unique component in hospice care.

Hospice care is provided by an interdisciplinary team of professionals including nurses, physicians, social workers, counselors (bereavement, spiritual, dietary, and other), nursing assistants, volunteers and therapists. The services provided include clinical pain management, personal hygiene maintenance, emotional and spiritual counseling, bereavement support, medications, medical supplies and equipment, inpatient stays if necessary, and ancillary services such as physical, occupational, and speech therapy.

Hospice services are available to all age groups, from newborn to elderly. Hospice services may be covered by Medicare, Medicaid (Medical Assistance), and private insurance companies.

Data Collection and Report Preparation

The 2004 survey population consisted of all 61 hospices licensed by the State of Wisconsin to operate in 2004. The survey instrument, prepared by the Bureau of Health Information and Policy (BHIP), was mailed with the Hospice Annual Report (licensure) form to all Wisconsin-licensed hospices in early January, 2005 from the Division of Disability and Elder Services, Bureau of Quality Assurance. The survey utilizes a survey date of December 31; that is, hospices are asked to report some survey items (such as number of patients) as of that date. Other data items (such as the number of patient days and the number of admissions and discharges) were reported for all of calendar year 2003. Staffing information was based on the number of personnel employed by hospices during the week of December 5-11, 2004.

Key Findings

- There were 61 hospices licensed to operate in Wisconsin in 2004, compared to 60 in 2003. One nonprofit hospice opened in 2004.
- Nonprofit organizations made up 84 percent of hospices and served 77 percent of all hospice patients.
- There were 2,687 hospice patients on December 31, 2004, a 15 percent increase from December 31, 2003. There were only 1,381 patients on December 31, 1999.
- Total hospice patients served increased 18 percent, from 15,436 patients in 2003 to 18,213 patients in 2004.
- The total number of FTE hospice employees increased 9 percent in 2004 (to 1,360 from 1,245 in 2003), while the number of patients on December 31 increased 15 percent.
- The number of FTE RNs working in Wisconsin hospices in 2004 increased 9 percent from the previous year, while FTE hospice aides increased 17 percent.
- In 2004, 95 percent of all hospice volunteers worked in nonprofit hospices (compared to 96 percent in 2003), while 4 percent worked in proprietary hospices (compared to 3 percent in 2003).
- Statewide, 67 percent of all volunteer hours were spent on patients (compared to 61 percent in 2003), and the rest were for office support, administrative services, and other activities.
- The number of hospice beds in hospices operating an inpatient facility increased 30 percent in 2004, and the number of hospice patient days in these facilities grew 46 percent.
- In 2004, 48 percent of Wisconsin hospice patients had a principal diagnosis of cancer, down from 51 percent in 2003, 55 percent in 2002, and 60 percent in 2001. Sixteen percent had a principal diagnosis of end-stage cardiovascular disease, compared to 15 percent in 2003.
- The number of hospice patients referred by nursing homes increased 19 percent (from 2,671 in 2003 to 3,170 in 2004), after a 16 percent increase in 2003, and a 17 percent increase in 2002.
- In 2004, total discharges from Wisconsin hospices increased 19 percent (from 13,523 in 2003 to 16,151 patients in 2004), after a 6 percent increase in 2003, and an 8 percent increase in 2002.
- Eighty-seven percent (14,008) of all Wisconsin hospice discharges in 2004 were deaths.
- From 2003 to 2004, the number of hospice patients increased 20 percent or more in 15 counties and in the eight out-of-state hospices as well.
- The number of hospice patients served by hospices in Milwaukee County increased 21 percent in 2004, after an increase of 8 percent in 2003, 13 percent in 2002 and 27 percent in 2001.
- Hospices in three counties – Milwaukee, Dane, and Brown – served 55 percent of all Wisconsin hospice patients in 2004, compared with 54 percent in 2003.
- Thirty-five counties in Wisconsin had no hospice service.

-
- In 2004, the hospice utilization rate among people aged 65 and older was 21.3 patients per 1,000 population in this age group, an 18 percent increase from 2003 (18.1 per 1,000).
 - The hospice utilization rate among people aged 85 and older was 56.6 per 1,000 population in 2004, a 13 percent increase from 2003 (49.9 per 1,000).
 - The total number of hospice patient days increased 19 percent in 2004 (from 779,296 days in 2003 to 924,207 days), after a 16 percent increase in 2003 and a 9 percent increase in 2002.
 - Most hospice patient days were for routine home care (97 percent).
 - A length of stay of fewer than 60 days was reported for 78 percent of hospice patients who died or were discharged in 2004 (up from 77 percent in 2003).
 - Thirty-four percent of hospice patients died or were discharged within 7 days of admission to a hospice program in 2004, up from 31 percent in 2003.
 - The number of hospice admissions increased 18 percent, from 14,009 in 2003 to 16,502 in 2004.
 - Seventy-seven percent of hospice patients admitted in 2004 had Medicare as their primary pay source (vs. 76 percent in 2003). Nine percent had private insurance, compared to 8 percent in 2003.
 - A total of 9 percent of hospice patients admitted had Medicaid as primary pay source, either Medicaid alone (3 percent), or Medicaid and Medicare (6 percent).
 - On December 31, 2004, 80 percent of hospice patients had Medicare as their primary pay source (compared with 77 percent in 2003), 6 percent of hospice patients had private insurance, 3 percent had Medicaid only, and 8 percent had both Medicare and Medicaid (compared with 11 percent in 2003).
 - On December 31, 2004, 53 percent of hospice patients were residing at home or in some other private residence, a decline of 5 percentage points from 2003.
 - Twenty-seven percent of hospice patients were residing in nursing homes on December 31, 2004, (same as in 2003). Only 15 percent of hospice patients were residing in nursing homes in 1999.
 - The percent of hospice patients residing in CBRFs increased from 9 percent in 2003 to 13 percent in 2004.
 - Total hospice patient deaths increased 19 percent between 2003 and 2004, reflecting an 18 percent increase in total hospice patients served.

Hospice Characteristics

Table 1. Hospice Services and Patients by Hospice Ownership Type, Wisconsin 2004

	Total	Ownership of Hospice					
		Governmental		Nonprofit		Proprietary	
		Number	Percent	Number	Percent	Number	Percent
Number of Hospices	61	3	5%	51	84%	7	11%
Number of Unduplicated Hospice Patients	18,213	114	1	14,101	77	3,998	22
Number of Hospice Patients on December 31, 2004	2,687	13	<1	1,907	71	767	29
Average Daily Census for Calendar Year 2004	2,527	10	<1%	1,817	72%	700	28%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: See Technical Notes for an explanation of the unduplicated patient count.

- There were 61 hospices licensed to operate in Wisconsin in 2004, compared to 60 in 2003. One nonprofit hospice opened in 2004.
- Nonprofit organizations made up 84 percent of hospices and served 77 percent of all hospice patients.
- The seven proprietary hospices (11 percent) served 22 percent of all hospice patients.
- There were 2,687 hospice patients on December 31, 2004, a 15 percent increase from December 31, 2003. There were only 1,381 patients on December 31, 1999.
- Total hospice patients served increased 18 percent, from 15,436 patients in 2003 to 18,213 patients in 2004.

Table 2. Hospice Certification and Accreditation, Wisconsin 2004

Year	Number of Hospices			
	Total Number of Hospices	Medicare Certified	Medicaid Certified	JCAHO or CHAP Accredited
1999	60	59	58	35
2000	61	59	57	35
2001	61	60	58	35
2002	59	58	56	34
2003	60	59	58	34
2004	61	59	58	34

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- Of the 61 Wisconsin-licensed hospices, 59 reported they were Medicare-certified providers and 58 reported they were Medicaid-certified providers.
- Fifty-six percent (34) of the 61 hospices reported they were accredited by an organization such as the [Joint Commission on Accreditation of Healthcare Organizations](#) (JCAHO), or the Community Health Accreditation Program (CHAP).

Hospice Characteristics

Table 3. Full-time Equivalent (FTE) Employees of Hospices by Ownership Type, Wisconsin, December 2004

Employee Category	Total		Ownership of Hospice		
	Number	Percent	Governmental	Nonprofit	Proprietary
Managing Employee/ Administrators	106	8%	1	87	18
Physicians	8	1	<1	6	2
Registered Nurses	456	34	3	361	92
Licensed Practical Nurses	54	4	0	31	23
Hospice Aides	283	21	1	206	77
Registered Physical Therapists	7	1	0	6	<1
Registered Occupational Therapists	2	<1	0	2	0
Speech/Language Pathologists	<1	<1	<1	0	0
Bereavement Counselors	42	3	<1	37	5
Social Workers	114	8	1	92	21
Dietary	7	1	<1	6	1
Volunteer Coordinators	35	3	<1	29	6
Chaplains	38	3	0	23	16
Clerical/Office Support	186	14	1	159	26
Other	21	2	0	11	10
Total	1,360	100%	7	1,056	297

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: The count of employees was from the week of December 5-11, 2004.

- The total number of FTE hospice employees increased 9 percent in 2004 (to 1,360 from 1,245 in 2003), while the number of patients on December 31 increased 15 percent.
- The number of FTE RNs working in Wisconsin hospices in 2004 increased 9 percent from the previous year, while FTE hospice aides increased 17 percent.

Table 4. Number of Hospice Volunteers and Hours of Volunteer Services, Wisconsin 2004

	Total	Governmental		Nonprofit		Proprietary	
		Number	Percent	Number	Percent	Number	Percent
Number of Volunteers	4,850	49	1%	4,617	95%	184	4%
Hours of Volunteer Services:							
Total Hours	221,014	639	<1	171,686	78	48,689	22
Patient Services	148,515	312	<1	106,435	72	41,768	28
Office Support/Adminis. Services	43,777	133	<1	40,541	93	3,103	7
Other Activities	28,722	194	1%	24,710	86%	3,818	13%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

- In 2004, 95 percent of all hospice volunteers worked in nonprofit hospices (compared to 96 percent in 2003), while 4 percent worked in proprietary hospices (compared to 3 percent in 2003).
- Statewide, 67 percent of all volunteer hours were spent on patients (compared to 61 percent in 2003), and the rest were for office support, administrative services, and other activities.

Hospice Characteristics

Table 5. Hospice Facility Operation and Contracts with Other Facilities, Wisconsin 2004

	Number	Percent
Total number of hospices	61	100%
Total number of hospice patient days	924,207	
Number of hospices operating a residential facility	12	20
Number of hospice beds in these facilities	140	
Number of hospice patient days in these facilities	25,916	
Number of hospices operating an inpatient facility	7	11
Number of hospice beds in these facilities	113	
Number of hospice patient days in these facilities	13,201	
Number of hospices providing palliative and supportive services for individuals who have not elected hospice	11	18
Number of patients	846	
Number of hospices that had a contract with hospitals/SNFs for symptom management and/or inpatient respite care	59	97
Number of contracts	384	
Number of acute care days	13,663	
Number of respite care days	2,595	
Number of hospices that had a contract with a nursing facility for inpatient respite services	4	7
Number of contracts	7	
Number of respite care days	0	
Number of hospices that had a contract with a nursing facility for hospice routine care	56	92
Number of contracts	626	
Number of hospice patients residing in nursing homes	3,862	
Number of days spent in nursing homes by hospice patients	251,977	
Number of hospices that had a contract with a community-based residential facility (CBRF)	47	77
Number of contracts	739	
Number of hospices that had a contract with an adult family home	13	21
Number of contracts	25	
Number of hospices that had a contract with a residential care apartment complex (RCAC)	29	48
Number of contracts	78	
Number of hospices that had a contract with an HMO or other managed care organization	31	51%
Source:	Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.	
Notes:	Hospice patients could have more than one type of stay during the year. See Technical Notes for definitions of "routine care," "respite care," and other hospice levels of care.	

- In 2004, the number of hospices that operated a residential facility increased by one from 2003. The number of beds in these facilities increased 10 percent, and the number of patient days in these facilities increased 17 percent.
- The number of hospice beds in hospices operating an inpatient facility increased 30 percent in 2004, and the number of hospice patient days in these facilities grew 46 percent.
- The number of hospice acute care days under contracts with hospitals or skilled nursing facilities (SNFs) for symptom management and/or inpatient respite care decreased 9 percent (from 14,938 in 2003 to 13,663 in 2004), while the number of respite care days declined 18 percent (from 3,183 to 2,595).
- The number of contracts that hospices had with nursing facilities for hospice routine care services increased 11 percent (from 563 in 2003 to 626 in 2004). The number of hospice patients residing in nursing homes under these contracts was up 9 percent, and the number of days spent in nursing homes by these hospice patients increased 28 percent.

Characteristics of Hospice Patients

Table 6. Principal Diagnosis of Hospice Patients, Wisconsin 2004

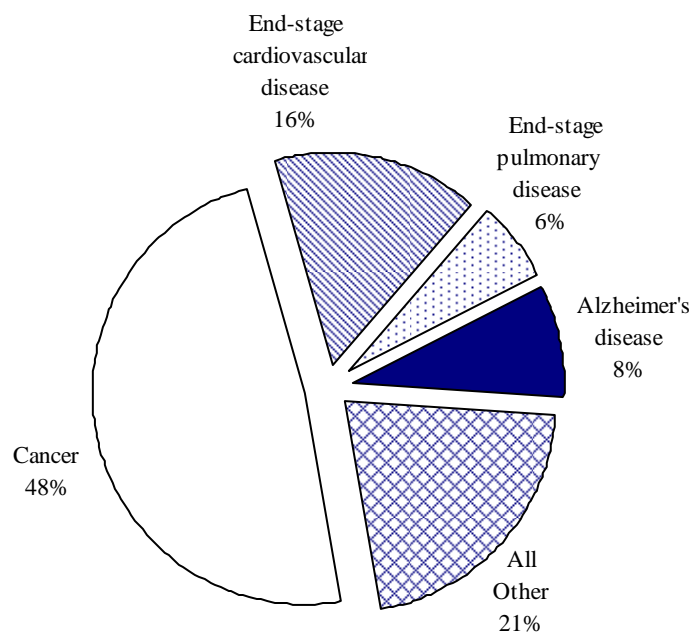
Principal Diagnosis	Number of Patients	Percent of Patients
Total	18,213	100%
Malignant neoplasm (cancer)	8,778	48
End-stage cardiovascular disease	2,908	16
Alzheimer's disease/other dementia	1,541	8
End-stage pulmonary disease	1,123	6
Renal failure/end-stage kidney disease	602	3
ALS (amyotrophic lateral sclerosis)	113	1
Diabetes	41	<1
HIV infection	16	<1
Other conditions	3,091	17%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Principal diagnosis is the diagnosis responsible for admission to the hospice.
Percentages may not add to 100 percent due to rounding.

- In 2004, 48 percent of Wisconsin hospice patients had a principal diagnosis of cancer, down from 51 percent in 2003, 55 percent in 2002, and 60 percent in 2001. Sixteen percent had a principal diagnosis of end-stage cardiovascular disease, compared to 15 percent in 2003.

Figure 1. Principal Diagnosis of Hospice Patients, Wisconsin 2004



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Characteristics of Hospice Patients

Table 7. Hospice Patients by Referral Source, Wisconsin 2004

Referral Source	Number of Patients	Percent
Total	18,213	100%
Physician	5,951	33
Hospital	5,334	29
Self-Referral	436	2
Patient's Family	1,571	9
Home Health Agency	581	3
Nursing Home	3,170	17
Assisted Living:		
Residential care apartment complex	22	<1
Adult family home	53	<1
Community-based residential facility	572	3
Other	523	3%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.

- Thirty-three percent of hospice patients were referred to the hospice by a physician (down from 35 percent in 2003), and 29 percent were referred by a hospital (up from 27 percent in 2003).
- The number of hospice patients referred by nursing homes increased 19 percent (from 2,671 in 2003 to 3,170 in 2004), after a 16 percent increase in 2003, and a 17 percent increase in 2002.

Table 8. Discharges of Hospice Patients by Reason for Discharge, Wisconsin, 2004

Reason for Discharge	Patients Discharged	
	Number	Percent
Total Discharges/Deaths	16,151	100%
Hospice Care Not Appropriate	706	4
Transferred to Another Hospice	388	2
Revocation of Hospice Benefit	787	5
Other	262	2
Deaths	14,008	87%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percentages may not add to 100 percent due to rounding.

- In 2004, total discharges from Wisconsin hospices increased 19 percent (from 13,523 in 2003 to 16,151 patients in 2004), after a 6 percent increase in 2003, and an 8 percent increase in 2002.
- Eighty-seven percent (14,008) of all Wisconsin hospice discharges in 2004 were deaths.
- Four percent of discharges from hospices were because hospice care was no longer appropriate (probably because the patient's prognosis had changed).
- Another 5 percent of discharges were due to "revocation of hospice benefit." This means the patient voluntarily withdrew from hospice care.

Hospices in Wisconsin, 2004



* Map does not show the eight Wisconsin-licensed hospices located outside the state.

Wisconsin Division of Public Health
Bureau of Health Information and Policy

Table 9. Hospices and Patients by County of Hospice Location, Wisconsin 2004

County of Hospice	Number of		Percent of	County of Hospice	Number of		Percent of
	Hospices	Patients	Total Patients		Hospices	Patients	Total Patients
All	61	18,213	100%	Manitowoc	2	100	1%
Ashland	1	224	1	Marathon	1	577	3
Barron	1	109	1	Milwaukee	10	6,929	38
Brown	3	1,429	8	Monroe	1	149	1
Calumet	1	15	<1	Oneida	1	282	2
Chippewa	1	205	1	Portage	1	189	1
Crawford	1	132	1	Price	1	69	<1
Dane	1	1,727	9	Rock	2	326	2
Dodge	1	101	1	St. Croix	1	72	<1
Eau Claire	1	340	2	Sauk	1	246	1
Fond du Lac	1	535	3	Shawano	1	95	1
Grant	1	75	<1	Sheboygan	2	512	3
Green	1	127	1	Taylor	1	67	<1
Iowa	1	120	1	Vernon	1	44	<1
Jackson	1	100	1	Washington	1	10	<1
Jefferson	1	270	1	Waukesha	1	414	2
Kenosha	1	498	3	Winnebago	2	817	4
La Crosse	2	444	2	Wood	1	315	2
Lafayette	1	24	<1	Out-of-State	8	431	2%
Langlade	1	94	1%				

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Patient counts are by location of the hospice (not patient residence).
Counties shown have at least one hospice located in the county.
Percentages may not add to 100 percent due to rounding.

- In 2004, 38 percent of Wisconsin hospice patients were served by hospices located in Milwaukee County (compared to 37 percent in 2003).
- Only one hospice was located in Dane County but that hospice served 9 percent of Wisconsin hospice patients in 2004. The number of hospice patients served by this Dane County hospice increased 19 percent in 2004, after increasing 14 percent in 2003 and 6 percent in 2002.
- From 2003 to 2004, the number of hospice patients increased 20 percent or more in 15 counties and in the eight out-of-state hospices as well.
- The number of hospice patients served by hospices in Milwaukee County increased 21 percent in 2004, after an increase of 8 percent in 2003, 13 percent in 2002 and 27 percent in 2001.
- Hospices in three counties – Milwaukee, Dane, and Brown – served 55 percent of all Wisconsin hospice patients in 2004, compared with 54 percent in 2003.
- Thirty-five counties in Wisconsin had no hospice service.

Characteristics of Hospice Patients

Table 10. Number, Percent and Utilization Rate of Hospice Patients by Age and Sex, Wisconsin 2004

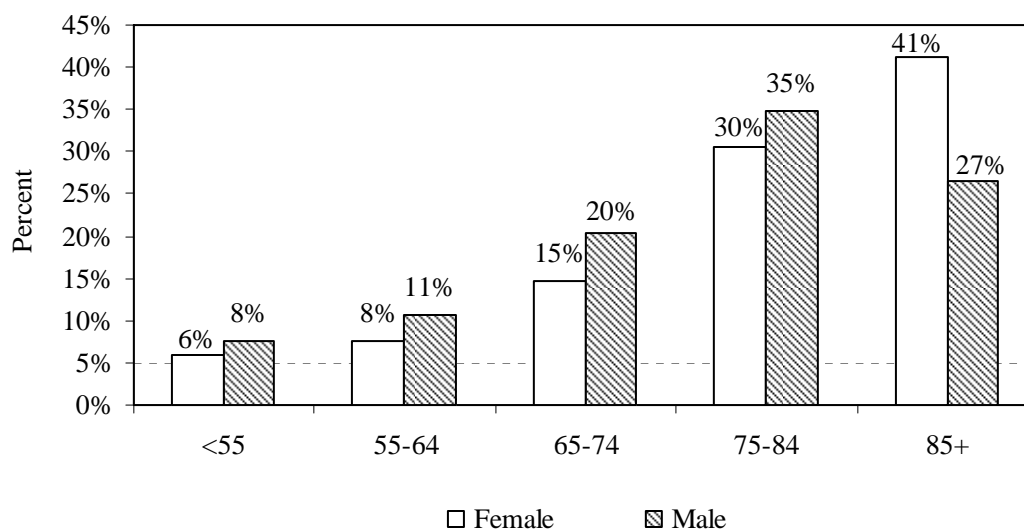
Age	Total			Female			Male		
	Number	Percent	Rate	Number	Percent	Rate	Number	Percent	Rate
All Patients	18,213	100%	3.3	10,133	100%	3.6	8,080	100%	2.9
Under 55	1,221	7	0.3	604	6	0.3	617	8	0.3
55-64	1,636	9	3.0	777	8	2.8	859	11	3.2
65-74	3,139	17	8.9	1,497	15	8.0	1,642	20	10.1
75-84	5,903	32	23.0	3,086	30	20.4	2,817	35	26.7
85 or older	6,314	35	56.6	4,169	41	53.2	2,145	27	64.4
65 or older	15,356	84%	21.3	8,752	86%	21.0	6,604	82%	21.9

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: The rate is the number of hospice patients per 1,000 statewide population in the age group. Percentages may not add to 100 percent due to rounding.

- In 2004, the hospice utilization rate among people aged 65 and older was 21.3 patients per 1,000 population in this age group, an 18 percent increase from 2003 (18.1 per 1,000).
- The hospice utilization rate among people aged 85 and older was 56.6 per 1,000 population in 2004, a 13 percent increase from 2003 (49.9 per 1,000).
- Males aged 85 and over had a 21 percent higher hospice utilization rate than females in this age group (64.4 per 1,000 vs. 53.2 per 1,000).
- The hospice utilization rate in Wisconsin in 2004 increased among all age groups except the group under age 55.

Figure 2. Percent of Hospice Patients by Age and Sex, Wisconsin 2004



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Table 11. Hospice Patient Days by Level of Care, Wisconsin 2004

Level of Care	Patient Days	Percent
Total patient days	924,207	100%
Routine home care	895,259	97
Continuous home care	3,345	<1
Inpatient care: acute/symptom management	22,448	2
Inpatient respite care	3,155	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding. See Technical Notes for level of care definitions.

- The total number of hospice patient days increased 19 percent in 2004 (from 779,296 days in 2003 to 924,207 days), after a 16 percent increase in 2003 and a 9 percent increase in 2002.
- Most hospice patient days were for routine home care (97 percent).
- Inpatient days for acute care and/or symptom management increased 17 percent in 2004.
- Inpatient respite care days decreased 7 percent, from 3,392 days in 2003 to 3,155 days in 2004.

Table 12. Length of Stay of Hospice Patients Who Died or Were Discharged, Wisconsin 2004

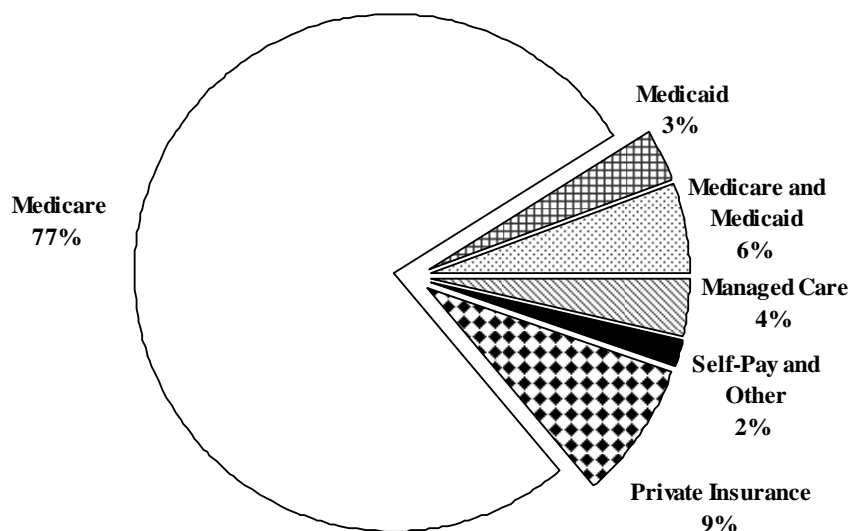
Length of Stay	Number of Patients	Percent
Total Discharges/Deaths	16,151	100%
1 to 7 days	5,381	34
8 to 14 days	2,473	15
15 to 29 days	2,415	15
30 to 59 days	2,190	14
60 to 89 days	1,046	7
90 to 179 days	1,340	8
180 days to 1 year	825	5
More than 1 year	336	2%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: "Length of stay" means time from when the patient was admitted to the hospice program until the patient died or was discharged from the program.
The total includes 145 patients whose length of stay was not reported.
Percentages may not add to 100 percent due to rounding.

- A length of stay of fewer than 60 days was reported for 78 percent of hospice patients who died or were discharged in 2004 (up from 77 percent in 2003).
- Thirty-four percent of hospice patients died or were discharged within 7 days of admission to a hospice program in 2004, up from 31 percent in 2003.
- Hospice patients who died or were discharged 180 days or more after admission stayed at 7 percent.

Figure 3. Primary Pay Source at Admission to a Hospice Program for Patients Admitted in 2004, Wisconsin



Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Table 13. Primary Pay Source at Admission to a Hospice Program for Patients Admitted in 2004, Wisconsin

Primary Pay Source	Number of Patients	Percent
Total Admissions	16,502	100%
Medicare	12,726	77
Medicaid	562	3
Medicare and Medicaid ("dual entitlees")	928	6
Managed Care (HMO)	583	4
PACE/Partnership (Program of All-Inclusive Care for the Elderly)	2	<1
Private Insurance	1,419	9
Self Pay	177	1
Other	105	1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.
Primary pay source is the payment source that the hospice expects will pay the largest amount for the patient's hospice care.

- The number of hospice admissions increased 18 percent, from 14,009 in 2003 to 16,502 in 2004.
- Seventy-seven percent of hospice patients admitted in 2004 had Medicare as their primary pay source (vs. 76 percent in 2003). Nine percent had private insurance, compared to 8 percent in 2003.
- A total of 9 percent of hospice patients admitted had Medicaid as primary pay source, either Medicaid alone (3 percent), or Medicaid and Medicare (6 percent).
- The number of admissions with managed care (HMO) as their primary pay source decreased from 663 patients in 2003 to 583 patients in 2004.

Table 14. Primary Pay Source for Hospice Patients, Wisconsin, December 31, 2004

Primary Pay Source	Number of Patients	Percent
Total Patients	2,687	100%
Medicare	2,137	80
Medicaid	76	3
Medicare and Medicaid (“dual entitlements”)	228	8
Managed Care (HMO)	29	1
PACE/Partnership (Program of All-Inclusive Care for the Elderly)	2	<1
Private Insurance	161	6
Self Pay	35	1
Other	19	1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentages may not add to 100 percent due to rounding.
Primary pay source is the payment source that the hospice expects will pay the largest amount for the patient’s hospice care.

- On December 31, 2004, 80 percent of hospice patients had Medicare as their primary pay source (compared with 77 percent in 2003), 6 percent of hospice patients had private insurance, 3 percent had Medicaid only, and 8 percent had both Medicare and Medicaid (compared with 11 percent in 2003).

Table 15. Living Arrangements of Hospice Patients, Wisconsin, December 31, 2004

Living Arrangement	Number of Patients	Percent
Total Patients	2,687	100%
Home/private residence	1,435	53
Nursing home	725	27
Hospice residential facility	75	3
Assisted living:		
Residential care apartment complex	19	1
Adult family home	24	1
Community-based residential facility (CBRF)	343	13
Inpatient facility (acute-care hospitals, etc.)	65	2
Other site	1	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Notes: Percentage may not add to 100 percent due to rounding.
See Technical Notes for definitions of selected living arrangements.

- On December 31, 2004, 53 percent of hospice patients were residing at home or in some other private residence, a decline of 5 percentage points from 2003.
- Twenty-seven percent of hospice patients were residing in nursing homes on December 31, 2004, (same as in 2003). Only 15 percent of hospice patients were residing in nursing homes in 1999.
- The percent of hospice patients residing in CBRFs increased from 9 percent in 2003 to 13 percent in 2004.
- The percent of hospice patients residing in hospice residential facilities increased from 2 percent in 2003 to 3 percent in 2004.

Table 16. Deaths Among Hospice Patients by Place of Occurrence, Wisconsin 2004

Location of Death	Number of Patients	Percent
Total Deaths	14,008	100%
Home/private residence	6,816	49
Nursing home	3,186	23
Hospice residential facility	1,189	8
Assisted living:		
Residential care apartment complex	73	1
Adult family home	19	<1
Community-based residential facility (CBRF)	758	5
Inpatient facility (acute-care hospitals, etc.)	1,948	14
Other place	19	<1%

Source: Annual Survey of Hospices, Bureau of Health Information and Policy, Division of Public Health, Department of Health and Family Services.

Note: Percentages may not add to 100 percent due to rounding.

- Total hospice patient deaths increased 19 percent between 2003 and 2004, reflecting an 18 percent increase in total hospice patients served.
- Of hospice patient deaths in 2004, 49 percent occurred at home (compared with 50 percent in 2003), 23 percent occurred in nursing homes (same as in 2003), and 14 percent occurred in a hospital or other inpatient facility (16 percent in 2003).
- The percent of hospice patient deaths that occurred in hospice residential facilities and the percent in CBRFs both increased by 1 percentage point.

Technical Notes

Unduplicated patient count. Each person served by a hospice organization is counted only once, regardless of the number of times during the year that person was admitted and discharged.

Hospice Level of Care

Routine home care day is a day on which an individual who has chosen hospice care is receiving services at the place of residence considered his or her home.

Continuous home care day is a day on which an individual who has chosen hospice care is not in an inpatient facility and is receiving continuous care, primarily nursing care, to achieve palliation or management of acute medical symptoms. Home health aide or homemaker services may be provided to supplement the nursing care. Continuous home care is furnished during periods of crisis to maintain the terminally ill patient at home.

Inpatient care day (symptom management) is a day on which an individual who has chosen hospice care receives general inpatient care in an inpatient facility for pain control or acute or chronic symptom management which cannot be managed in other settings.

Inpatient respite care day is a day on which an individual who has chosen hospice care receives care in an approved inpatient facility on a short-term basis to relieve the family or other persons caring for the individual at home.

Living Arrangements

A community-based residential facility (CBRF) is a place where 5 or more unrelated adults reside in which care, treatment or services above the level of room and board but not including nursing care are provided to residents as a primary function of the facility.

A residential care apartment complex is a living unit for severely disabled individuals that is developed by a sponsor and that is not physically connected to a nursing home or hospital except by common service units for laundry, kitchen or utility purposes and that may include buildings and grounds for activities related to residence, including congregate meal sites, socialization, and physical rehabilitation facilities.

An adult family home means a place where 3 or 4 adults not related to the licensee reside in which care, treatment or services above the level of room and board but not including nursing care are provided to persons residing in the home as a primary function of the place.

ATTACHMENT I 2004 ANNUAL SURVEY OF HOSPICES

The Statistical Summary is to be provided by agencies submitting an annual report. If you have questions about completing Attachment I, call Kitty Klement (608-267-9490), Jane Conner (608-267-9055), Lu Ann Hahn (608-266-2431), or Kim Voss (608-267-1420).

Time Periods:

This summary requests information from varying time periods. Some questions refer to the entire calendar year (January 1 - December 31, 2004), others refer to a specific week (December 5 - 11, 2004), or a specific day (December 31, 2004). Be careful to answer questions for the correct time period.

Patient Counts:

Patients are counted two ways:

1. Only once to determine the number of individual people the agency served by primary diagnosis, race and age.
2. Multiple times, when appropriate to identify the number of patients who received various types of services, whose payments came from various pay sources, and who were admitted and/or discharged from various places and programs.

In some instances, patient counts in one question must equal patient counts in other questions. When this is the case, a footnote is used as a reminder.

Diagnoses Reporting:

Diagnostic categories on Page 4, number 23, are based on the ICD-9-CM classification system.

Follow-up for corrections/clarifications:

All responses will be edited for completeness, accuracy and clarity. If any problems are found, the contact person listed on Page 8 will be telephoned for corrections/clarifications.

OUT OF STATE AGENCIES SHOULD REPORT WISCONSIN DATA ONLY.

STATISTICAL SUMMARY

AGENCY INFORMATION

1. Was this hospice in operation for the entire calendar year of 2004? ☐ 1. Yes ☐ 2. No

If no, and operation dates began after January 1, 2004, or ended before December 31, 2004, list those dates of operation below.

Beginning Date

Month Day '04

Ending Date

Month Day '04

Days of Operation

2. Is the hospice certified for Medicare (Title 18)? ☐ 1. Yes ☐ 2. No
3. Is the hospice certified for Medicaid (Title 19)? ☐ 1. Yes ☐ 2. No
4. Is the hospice accredited by JCAHO or CHAPS? ☐ 1. Yes ☐ 2. No

5. Is the hospice licensed as a hospice residential facility? (e.g., "hospice house") ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of beds in the facility _____
- b. Total number of days spent by hospice patients in the facility in 2004 _____
6. Is the hospice Medicare certified as an inpatient facility? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of beds in the facility _____
- b. Total number of days spent by hospice patients in the facility in 2004 _____
7. Does the hospice provide Palliative and Supportive Services for individuals who have not elected hospice? ☐ 1. Yes ☐ 2. No
- a. If yes, how many patients received Palliative and Supportive Services in 2004? _____
8. Does the hospice have a contract with a hospital(s) or skilled nursing facility (SNF) for symptom management and/or inpatient respite care? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts _____
- b. Total number of acute care (symptom management) days in 2004 _____
- c. Total number of inpatient respite care days in 2004 _____
9. Does the hospice have a contract with an intermediate care nursing facility (NF) for inpatient respite services? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts _____
- b. Total number of inpatient respite care days in 2004 _____
10. Does the hospice have a contract, agreement or memorandum of understanding with a skilled nursing facility (SNF) to provide routine hospice home care? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding _____
- b. Total number of unduplicated hospice patients with SNF stays in 2004 _____
- c. Total number of days spent in SNFs by hospice patients in 2004 _____
11. Does the hospice have a contract, agreement or memorandum of understanding with a community-based residential facility (CBRF) to provide routine hospice home care? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding _____
12. Does the hospice have a contract, agreement or memorandum of understanding with an adult family home to provide routine hospice home care? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding _____
13. Does the hospice have a contract, agreement or memorandum of understanding with a residential care apartment complex (RCAC) to provide routine hospice home care? ☐ 1. Yes ☐ 2. No
- a. If yes, indicate the number of contracts, agreements or memorandums of understanding _____
14. Does the hospice have a contract with an HMO or other managed-care organization(s) to provide services? ☐ 1. Yes ☐ 2. No

PATIENT INFORMATION

15. Number of **patients** on the hospice caseload on January 1, 2004
(As reported on the 2003 survey, Page 3, LINE 18. If different, explain the change/reason.)
(Any admissions on or after January 1st should be listed on line 16.)
- a. Of the number of patients who were on the open caseload beginning January 1, 2004 (line 15, above), how many of those patients are also listed as an admission(s) during 2004 on line 16?
16. Total number of **admissions** during 2004
a. Of the total admissions, how many were readmissions?
(Readmissions are the number of admissions above and beyond a patient's first admission during 2004. If an individual was formally admitted more than once during the calendar year, count each admission, except the first one, as a readmission. For example, if a patient was formally admitted to the agency five times during the calendar year, that would be five admissions, of which four were readmissions.)
17. Number of hospice **patients discharged** during 2004 for each reason listed.
- a. Discharged - hospice care not appropriate (*no longer meets hospice criteria*)
b. Transferred - hospice services provided by another hospice
c. Revocation of hospice benefit (*individual chooses to leave hospice*)
d. Other (*please specify*)
e. Deaths
f. **Total Discharged**
18. Total number of patients on the hospice caseload on December 31, 2004
(Line 15, plus line 16, minus line 17.f.)
19. Report the **Total Number of Individual Patients** for 2004, using the following formula to calculate the total.
- a. Patients on January 1, 2004 caseload (line 15)
Minus line 15.a (1/1/04 patients also counted as an admission during 2004)

Subtotal
- b. Admissions (line 16)
Minus readmissions (line 16.a)
Equals the number of patients admitted

Subtotal
- c. **Total** individual patient count (unduplicated) for 2004. (Add **subtotals** in question 19)
(The number reported here **MUST** equal the "TOTALS" on Page 4, no. 21, 22 & 23.)
20. Average Daily Census for calendar year 2004, (total days of care, Page 5, number 24, divided by the days of operation, 366 days, or as reported on page 1, item 1.)
(Round to the nearest whole number.)

21. Total number of **unduplicated patients** served during 2004 by age, gender, and race/ethnicity.

RACE	AGE							Total
	19 & under	20-54	55-64	65-74	75-84	85-94	95+	
White								
Black or African American								
American Indian								
Southeast Asian								
Asian or Pacific Islander								
Other								
TOTAL*								(a)
GENDER								
Male								(b)
Female								(c)
MAKE SURE that the total males, (line b), plus total females, (line c), equal the total number of patients, (line a).								
Hispanic/Latino**								

* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

** Include Hispanic/Latino patients in the appropriate racial categories listed above, as Hispanic/Latino is not considered a race.

22. Total number of **unduplicated patients** served during 2004 by referral source.

DO NOT WRITE IN SHADED AREA

REFERRAL SOURCE	NUMBER OF PATIENTS
a. Physician	
b. Self-referral	
c. Patient's family	
d. Hospital	
e. Home health agency	
f. Nursing home	
g. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
h. Other (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

23. Total number of **unduplicated patients** served in 2004 by principal diagnosis (i.e., the diagnosis responsible for admission to the hospice).

PRINCIPAL DIAGNOSIS	NUMBER OF PATIENTS
a. Malignant neoplasm (cancer) (140 - 239)	
b. Cardiovascular disease (390 - 459)	
c. Pulmonary disease (415-417, 492, 496)	
d. Renal failure/kidney disease (584.9 - 593.9)	
e. Diabetes (250.0)	
f. Alzheimer's disease/other dementia (331.0, 290.1, 294.1)	
g. AIDS (042)	
h. ALS (Lou Gehrig's disease) (335.20)	
i. Other (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total unduplicated patients on page 3, line 19.c.

24. Total number of **patient days** during 2004 for each level of care.

LEVEL OF CARE	PATIENT DAYS
a. Routine home care	
b. Continuous care	
c. Inpatient care – acute/symptom management	*
d. Inpatient respite care	**
TOTAL	

* If patient days are provided, provide the corresponding data on Page 2, line(s) 6.b and/or 8.b.

** If patient days are provided, provide the corresponding data on Page 2, line(s) 6.b, 8.c and/or 9.b.

25. For each patient discharged in 2004, (including deaths, and regardless of admission date), provide the **length of stay**.

- a. 1 to 7 days
- b. 8 to 14 days
- c. 15 to 29 days
- d. 30 to 59 days
- e. 60 to 89 days
- f. 90 to 179 days
- g. 180 days to 1 year
- h. More than 1 year
- i. **TOTAL (a+b+c+d+e+f+g+h)** *

* TOTAL **MUST** equal the total discharges on page 3, line 17.f.

26. Indicate the primary pay source **AT THE TIME OF ADMISSION** for all patients who were admitted during 2004.

PRIMARY PAY SOURCE	NUMBER OF PATIENTS
a. Medicare	
b. Medicaid	
c. Medicare & Medicaid	
d. Managed Care (HMO)	
e. PACE/Partnership	
f. Private Insurance	
g. Self Pay	
h. Other (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total admissions on page 3, line 16.

27. Indicate the primary pay source for all patients on the hospice caseload on December 31, 2004.

PRIMARY PAY SOURCE	NUMBER OF PATIENTS
a. Medicare	
b. Medicaid	
c. Medicare & Medicaid	
d. Managed Care (HMO)	
e. PACE/Partnership	
f. Private Insurance	
g. Self Pay	
h. Other (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total patients on the hospice caseload on page 3, line 18.

28. Of the patients on the hospice caseload on December 31, 2004, how many resided in each of the following locations?

DO NOT WRITE IN SHADED AREA

LOCATIONS	NUMBER OF PATIENTS
a. Home/private residence	
b. Nursing home	
c. Hospice residential facility	
d. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
e. Inpatient facility (e.g., acute care hospital, other)	
f. Other site (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total patients on the hospice caseload on page 3, line 18.

29. Of those patients who died in 2004, how many deaths occurred at each of the following locations?

DO NOT WRITE IN SHADED AREA

LOCATIONS	NUMBER OF DEATHS
a. Home/private residence	
b. Nursing home	
c. Hospice residential facility	
d. Assisted living	
1. Residential care apartment complex	
2. Adult family home	
3. Community-based residential facility (CBRF)	
e. Inpatient facility (e.g., acute care hospital, other)	
f. Other site (specify _____)	
TOTAL*	

* TOTAL **MUST** equal the total deaths on page 3, line 17.e.

PERSONNEL

30. **Personnel:** Complete the following table based on the week of **December 5 - 11, 2004**.

Include staff on vacation or other paid leave. Out-of-state agencies should report only staff time serving Wisconsin patients.

Full-Time Persons: Report the number of persons employed full-time.

Part-Time Persons: Report the number of persons employed part-time.

Part-Time Hours: For each employed person working less than *Full-time* hours per week, report the number of hours worked in that position. If a person serves in more than one job position, place an asterisk (*) next to the job title, record the hours worked in the part-time hours column for each position, but only record the person once in the part-time person column for the job position worked the most hours. (e.g., A person may work as a Hospice Aide for 25 hours and could possibly also work in a Dietary position for 15 hours. Record "25" in the part-time hours column for Hospice Aides, and record "15" in the part-time hours column for Dietary. Record a "1" in the part-time persons column for Hospice Aides, since the majority of the hours were worked in that capacity).

Contracted Staff Persons: Report the number of persons providing services through a formal contractual arrangement.

Volunteers: Uncompensated staff person.

ROUND HOUR FIGURES TO THE NEAREST WHOLE HOUR. NO DECIMALS. NO FTE'S

DO NOT WRITE IN SHADED AREA

JOB TITLE	Full-time Persons	Part-time Persons		Contracted Staff (No. of Persons)	Volunteers (No. of Persons)
		Personnel	Hours		
a. Managing Employee/Administrator					
b. Physicians *					
c. Registered Nurses *					
d. Licensed Practical Nurses					
e. Hospice Aides					
f. Registered Physical Therapists					
g. Registered Occupational Therapists					
h. Speech/Language Pathologists					
i. Bereavement Counselor *					
j. Social Workers *					
k. Dietary					
l. Chaplain					
m. Clerical/Office Support					
n. Volunteer Coordinator					
o. Other Volunteers					
p. Other (specify _____)					
TOTAL					

* "Core Team" members **MUST** be accounted for on this table.

31. Number of hours in workweek? (Enter as a 3-digit number, e.g., 40.0, 37.5, 35.0, etc.)

32. During 2004, how many total volunteers did the hospice agency have?

33. Indicate the total hours of service provided by volunteers during 2004.

ROUND TO THE NEAREST WHOLE HOUR. DO NOT USE DECIMALS.

SERVICE PROVIDED TO	NUMBER OF HOURS
a. Patients/Family	
b. Office Support/Administrative Services	
c. Other (specify _____)	

Person responsible for completing this form
(This is who will be contacted if further information is required.)

Contact person's area code/telephone number EXT:

Area Code/Fax Number

Email Address

Area Code/Telephone Number
(This number will be published in the Hospice directory.)

34. Does the agency have Internet access? ☐ 1. Yes ☐ 2. No

I certify that I have reviewed the information reported in this document for accuracy and the information is true and correct.

Name of Administrator (*type or print*)

SIGNATURE - Administrator

Date signed

FOR OFFICE USE ONLY
BQADISTR <input type="checkbox"/>

